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CONFIRMATION NO. 10/804,887 03/19/2004 A36182 071421.0111 8178 Kaùko Rautic TITLE OF INVENTION: CHIPPING HEAD PUBLICATION FEE DUE PREV. PAID ISSUE FEE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE TOTAL FEE(S) DUE DATE DUE \$700 \$0 \$1000 nonprovisional YES \$300 03/27/2007 03/29/2007 TBESHAH2 00080046 10804887 **EXAMINER ART UNIT** CLASS-SUBCLASS 1400.00 OP 144-118000 MILLER, BENA B 3725 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Baker Botts LLP (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02· or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): \square Individual \square Corporation or other private group entity \square Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed. Payment by credit card. Form PTO-2038 is attached. 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